



13142 US PTO  
122203

Date: December 22, 2003

Attorney Docket No.: STRM 5123 D5

First Inventor: Meir Strahilevitz

Title: SPECIES BINDING DEVICE AND METHOD OF MAKING  
Express Mail Label No.: EV 255300230 US.

Mail Stop Patent Application  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

17548 U.S. PTO  
10/743532



Attached are:

- Specification (Total Pages 27)
- Claims (Total Pages 4)
- Abstract (Total Pages 1)
- Drawing(s)  Informal  Formal (Total Sheets )
- Declaration & Power of Attorney (Total Pages )
  - Newly executed (original or copy)
  - Copy from a prior application (for continuation/divisional)
- Assignment Papers (cover sheet & document(s))
- Information Disclosure Statement
  - Copies of the art are in the parent cases; copies of Bratt & Ohlson, Clin. Lab. Immunol., (1998) Vol. 27, 191-95, and Goding, J. Immun. Methods, (1978) Vol. 20, 241-53, which are believed to be of particular relevance, are attached.
- Non-Publication Request
  - I hereby request that the attached application **not** be published under 35 U.S.C. 122(b). (if yes, be sure to fill out non-publication request form)
- Return Receipt Postcard
- Other:
- Applicant claims small entity status

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This application is a division of Serial No. 09/892,037, filed June 26, 2001, which is a division of pending application Serial No. 09/007,599, filed January 15, 1998, now U.S. Patent 6,264,623, which is a division of Serial No. 08/097,378, filed July 23, 1993, now U.S. Patent No. 5,753,227.

**-FEE CALCULATION**

	Number Filed		Number Extra	Other Than A Small Entity	Small Entity	Basic Fee
<b>Basic Fee</b>				<b>\$770.00</b>	<b>\$385.00</b>	<b>385.00</b>
<b>Total Claims</b>	<b>24</b>	<b>- 20 =</b>	<b>4 x</b>	<b>\$ 18.00</b>	<b>\$ 9.00=</b>	<b>36.00</b>
<b>Independent Claims</b>	<b>5</b>	<b>- 3 =</b>	<b>2 x</b>	<b>\$ 86.00</b>	<b>\$ 43.00=</b>	<b>86.00</b>
<b>Multiple Dependent Claims</b>	<b>0</b>			<b>\$290.00</b>	<b>\$145.00</b>	<b>0.00</b>

**TOTAL AMOUNT OF PAYMENT \$507.00 CUSTOMER NO.: 1688**

**METHOD OF PAYMENT (Check all that apply)**

Check  Credit Card  Money Order  Other  None

**Deposit Account: 162201**

**Deposit Account Name: Polster, Lieder, Woodruff & Lucchesi, L.C.**

**The Commissioner is authorized to: (Check all that apply)**

Charge any additional fees  
 Charge fee(s) indicated above to Deposit Account 162201  
 Credit any overpayments

  
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